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Bib Data Sheet

CONFIRMATION NO. 2337

|   |   |                                       |   |   |                                |
|---|---|---------------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/911,203  | <b>FILING DATE</b><br>07/24/2001<br><b>RULE</b>   | <b>CLASS</b><br><del>340</del><br>455 | <b>GROUP ART UNIT</b><br><del>2632</del><br>2642  | <b>ATTORNEY DOCKET NO.</b><br>72255/10436 |                                |
| <b>APPLICANTS</b><br>Clark A. Carty, Brunswick, OH;<br><b>** CONTINUING DATA *****</b> None BPT<br><b>** FOREIGN APPLICATIONS *****</b> None PRT  |   |                                       |   |   |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 09/05/2001</b>  |   |                                       |   |   |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged <u>B. J. Tien</u><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>OH         | <b>SHEETS DRAWING</b><br>6  | <b>TOTAL CLAIMS</b><br>11                 | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>23380   |   |                                       |   |   |                                |
| <b>TITLE</b><br>Wireless LAN monitoring device  |   |                                       |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>710   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                       | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |